Minority Health Facts

NATIVE AMERICANS in Rhode Island

INTRODUCTION

This report provides information about major health indicators for the Native American/American Indian population in the state, hereafter referred to as Rhode Island's "Native American" population. A Native American/American Indian is defined by the Office of Management and Budget (Directive 15) as a person having origins in any of the original people of North America and who maintains cultural affiliation through tribal affiliation or community recognition. This report presents data on socio-economic characteristics, morbidity and mortality, behavioral risks, infectious diseases, maternal and child health, and access to healthcare among

Native American Rhode Islanders in comparison to the overall state population. Please note that race and ethnic status for some Health Department data are based on self-identification.



POPULATION DEMOGRAPHICS

According to the 2000 Census, there are 5,121 Native Americans living in Rhode Island (RI), consisting primarily of the members of the Narragansett Indian tribe. Approximately 0.5% of the total RI population is Native American. According to 2000 Census data, over 60% of the urban Native American population lives in Providence County. The median age for the Native American population is 26.3 years; the median age for the overall state population is 36.7 years. Over 80% of the Native American population is under the age of 50; 70% of the overall state population is under the age of 50.

SOURCE: U.S. Bureau of the Census, 2000

SOCIO-ECONOMIC CHARACTERISTICS

The following are socio-economic characteristics of Rhode Island's Native American population from the 2000 Census. These characteristics may affect the health of Native American Rhode Islanders.

- There are almost four times as many Native Americans living below poverty level as the overall state population.
- The median household income for Native Americans is \$22,813—approximately \$19,000 less than the state median.
- A *lower* percent of Native Americans graduate from high school than the overall state population, and a *greater* percent are unemployed than the overall state population.

Table A: Socio-Economic Data

	NATIVE American	STATE
Percent of population living below poverty*	39.0	11.9
Percent of population that is unemployed*	6.5	3.6
Median household income*	\$22,813	\$42,090
High school graduation rate** (percent)	62.0	81.0

SOURCES: *U.S. Bureau of the Census, 2000. **RI Kids Count Factbook, 2004.

MORTALITY

For the period between 1999-2002, the three leading causes of death for Native Americans were heart disease, cancer, and diabetes. While diabetes is ranked as the third leading cause of death for the Native American population, diabetes is not ranked among the top five causes of death for the overall state population.

BEHAVIORAL RISK FACTORS

- Native Americans have higher rates of obesity than the overall state population.
- Twice as many Native Americans smoke cigarettes as the overall state population.
- One and half times more Native Americans engage in bingedrinking than the overall state population.

Table B: Leading Causes of Death, 1999-2002

#	NATIVE AMERICAN	STATE
1	Heart Disease	Heart Disease
2	Cancer	Cancer
3	Diabetes	Stroke
4	+	Chronic Respiratory Diseases
5	+	Pneumonia/Influenza

SOURCE: RI Dept. of Health, Division of Vital Records, RI Resident Deaths, ICD-10 Codes, 1999-2002. + Data too small for meaningful analysis.

Table C: Indicators of Behavioral Risk Factors

	NATIVE American	STATE
Percent of adult population ¹ that participates in light to moderate physical activity for at least 30 minutes per day	+	36.9
Percent of adult population that is overweight ² (20 yrs+)	61.0	56.9
Percent of adult population that is obese ³ (20 yrs+)	31.6	18.4
Percent of adult population that consumes at least five daily servings of fruits and vegetables per day	31.7	28.2
Percent of adult population that smokes cigarettes	52.3	23.0
Percent of adult population that consumed 5+ drinks on one or more occasions in past month (binge-drinking)	27.1	16.9

SOURCE: RI Behavioral Risk Factor Surveillance System 2000, Healthy People 2010 (2000-03 frequencies).

 $^{^{\}rm 1}\!\text{Adult}$ population refers to individuals 18 years and older unless otherwise specified.

 $^{^2}$ Overweight defined by CDC as BMI ≥ 25 .

 $^{^{3}}$ Obesity defined by CDC as BMI ≥ 30 .

⁺Data too small for meaningful analysis.

Table D: Incidence Rates of Infectious Diseases: Cases per 100,000 Population

INFECTIOUS DISEASES	NATIVE American	STATE
Gonorrhea*	+	93.0
Chlamydia*	+	286.0
Tuberculosis**	0	4.4
HIV/AIDS***	+	12.8

SOURCES: RI Dept. of Health, Office of Communicable Diseases,

*Sexually Transmitted Diseases (STD) Surveillance Data 2.

**Tuberculosis Database 2003.

***RI Epidemiologic Profile of HIV/AIDS 2002.

+Data too small for meaningful analysis.

Table E: Indicators of Maternal and Child Health

	NATIVE American	STATE
Percent of pregnant women with delayed prenatal care*	17.2	9.1
Rate of births to teens ages 15-19 (per 1,000 teens)*	+	33.1
Percent of births to mothers with less than 12 years of education*	34.0	15.0
Percent of infants with low birth weight (<5.5 lbs)*	10.7	7.5
Infant mortality rate (per 1,000 live births)**	9.7	6.6
Percent of children in poverty (<18 yrs)***	51.0	17.0
Percent of children under age 6 with high lead levels $(\geq 10 ug/dL)$)****	+	7.0

SOURCES: *RI Dept. of Health, Division of Family Health, Maternal and Child Health Database.

INFECTIOUS DISEASES

- During 2003, there were no known cases of tuberculosis among Native Americans in Rhode Island.
- Due to the small population of Native Americans in Rhode Island, the available statistics on sexually transmitted diseases, tuberculosis, and HIV/AIDS are too insignificant to report accurately.

MATERNAL AND CHILD HEALTH

- The overall state population has better maternal and child health outcomes than the Native American population in RI.
- Native Americans are *less* likely to receive prenatal care than the overall state population.
- *Three times* as many Native American children grow up in poverty as the overall state population of children.

^{**} Infant Mortality Database, 1998-2002.

^{***} U.S. Bureau of the Census, 2000.

^{****} RI Dept. of Health, Childhood Lead Poisoning Prevention. Program based on highest lead test result during calendar year 2002.

⁺ Data too small for meaningful analysis.

ACCESS TO HEALTHCARE

 Numbers are too small to draw statistically significant conclusions regarding Native Americans and access to healthcare.

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Table F: Indicators of Access to Healthcare

	NATIVE American	STATE
Percent of adults less than 65 years old that report having no health insurance*	7.8	9.5
Percent of adults that report a specific source of on-going healthcare*	+	84.4
Percent of population (all ages) stating usual source of care as none or emergency room**	4.3	5.1
Percent of women aged 40+ that report receiving a mammogram in the past 2 yrs*	+	91.3
Percent of women that reported having a pap test in the past 2 yrs*	+	87.8
Percent of adults that said "yes" when asked if there was a time they could not afford to see a doctor**	8.3	7.8

SOURCES: *RI Behavioral Risk Factor Surveillance System 2000-03, Healthy People 2010 (2000-03 frequencies).

For more information regarding minority health and the statistics contained in this report, please contact:

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^{**}Health Interview Survey, 2001.

⁺Data too small for meaningful analysis.